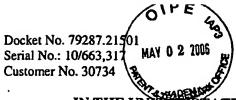
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Confirmation No.: 1325

Norman S. MARTUCCI et al.

Group Art Unit: 1772

Application No.: 10/663,317

Gloup Fut Offit: 1772

Filed: September 15, 2003

Examiner: Michael C. Miggins

For: CORRUGATED HOSE ASSEMBLY

United States Patent and Trademark Office Customer Service Window, Mail Stop Amendment Randolph Building

401 Dulany Street Alexandria, VA 22314

AMENDMENT AND RESPONSE UNDER 37 C.F.R. § 1.111

Sir:

In response to the Office Action dated December 23, 2005 ("the Office Action"),

Applicants respectfully request reconsideration of the above-identified patent application in light
of the following amendments and remarks.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks begin on page 4 of this paper.

Docket No. 79287.21501 Serial No.: 10/663,317 Customer No. 30734

charge any deficiencies in fees and credit any overpayments to Deposit Account No. 50-2036 with reference to Attorney Docket No. 79287.21501.

Respectfully submitted,

BAKER & HOSTETLER LLP

Scott A. Felder Reg. No. 47,558

Date: 2 MAY OF

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10663317

Application or Docket Number

U153. UDV:5

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

CLAIMS AS FILED - PART I (Column 1)					(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY				
TOTAL CLAIMS			23					RATE	FEE	ı	RATE	FEE			
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR	BASIC FEE	750.00			
TOTAL CHARGEABLE CLAIMS 2			23 minus 20=		• 3			X\$ 9=		OR	X\$18=	54			
INDEPENDENT CLAIMS 3 =				nus 3 =				X42=		OR	X84=				
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OFI	+280≃				
* If the difference in column 1 is less than zero, enter "C						column 2		TOTAL		OR	TOTAL	804			
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL E	ENTITY	OR	OTHER SMALL				
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE			
	Total	. 8	Minus	** 0	23	=		X\$ 9=		OR	X\$18=				
	Independent	* /	Minus	***	3			X42=		OR	X84=				
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM		J	+140=		OR	+280=				
								TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE				
(Column 1) (Column 2) (Column 3)															
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE			
	Total		Minus	**		a		X\$ 9=		OR	X\$18=				
	Independent	*	Minus	***		=		X42=		OR	X84=				
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J	+140=		OR	+280=				
								TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE				
(Column 1) (Column 2) (Column 3)															
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUN PREVI	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE			
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=				
AME.	Independent		Minus	***		-	1	X42=		OR	X84=				
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280=				
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										TOTAL					
****If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."															
	ine mignest Nur	moer Previously Pr	BU FOR (IOLEE)	The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											